

2023 VA Permanent Housing Conference

HUD-VASH Special Housing Types and Creative Unit
Identification

Agenda

- Welcome!
- Introductions
- Learning Objectives
- Overview of Special Housing Types
- Shared Housing
- HUD-VASH/Assisted Living Collaborations
- Medical Foster Home Collaborations

Welcome

Who is in the room?

- **SSVF Staff**
- **HUD-VASH Staff**
- **VA leadership**

Presenter Introductions

- Louise Rothschild, SSVF TA Team
- Steven Tillman, NHC VISN 8
- Kristen Weese, LCSW, Program Manager
- Alicia Sholtz, LCSW, HUD-VASH Coordinator

Learning Objectives

- Discuss multiple special housing types, including shared housing.
- Discuss how special housing types help Veterans break through historical barriers to housing
- Provide tips on how to work through and around barriers to using/creating special housing types with different funding sources.

Overview of Special Housing Types

Benefits of Special Housing

- **Expands** housing options and availability to Veterans
- Can provide a **more supportive environment**
- Can create **sense of community and family**
- **Reduces cost of rent**

Overview of Special Housing Types

Special Housing Types are required by the [HUD-VASH Operating Requirements - HUD Exchange](#)

The new waivers and program flexibilities include: (1) New authorization allowing a PHA to act in the role of the VAMC or DSPs for the purposes of family selection in cases where the PHA has been previously approved for this authority (section II.a.); (2) new allowance for a PHA and owner to agree to amend a PBV HAP contract to re-designate a regular PBV unit as a unit specifically designated for HUD–VASH families (section II.k); (3) new authorization for PHAs to apply separate payment standards for HUD–VASH families without additional HUD approval (section II.o.); and (4) new requirement that PHAs must allow Special Housing Types for HUD–VASH (section II.p.)

Overview of Special Housing Types

PHAs must permit (but may not require) HUD-VASH participants to use the following special housing types for tenant-based HUD-VASH assistance, regardless of whether these types are permitted in their administrative plan for other families:

Single Room Occupancy (SRO)	Private living and sleeping space for one occupant, with shared sanitary and food preparation facilities
Congregate Housing	Housing for elderly persons or persons with disabilities which includes food service, a shared kitchen/dining area, and a private living area
Group Home	State-licensed facility for elderly persons and/or persons with disabilities with a bedroom and communal living, dining, and bathroom spaces
Shared Housing	A single unit occupied by the assisted family and another resident or residents, including private space for each family and common spaces
Cooperative Housing	Housing owned by a nonprofit group whose members manage the housing and have the right to reside in a specific unit

Overview of Special Housing Types

- PHAs may permit participating households to use Housing Choice Voucher (HCV) assistance in a variety of special housing types.
 - A PHA's decision to allow households to use HCV assistance in these housing types should be based on the PHA's assessment of the difficulties encountered by households currently looking for housing, applicant and participant demographics suggesting a need for specialized housing, and the availability of suitable housing of the various types in the local market.
- A PHA must always allow the use of a special housing type if needed as a reasonable accommodation for persons with disabilities so that the program is readily accessible to and usable by persons with disabilities in accordance with 24 CFR part 8, even if the PHA does not normally allow the use of special housing types or limits the number of families using these special housing types.
- PHAs may not steer tenants to a particular housing type

PHA Special Housing Type Example

Congregate Housing

- Intended for use by elderly persons or persons with disabilities.
- Contains a shared kitchen, dining area and a private living area for the individual household of at least a living room, bedroom and bathroom.
- Food service for residents must be provided.
- There is a separate lease and HAP contract for each assisted family in congregate housing.
- The standard HAP contract is used.

Payment Standard

- If there is only one bedroom in the unit the PHA's payment standard for a 0-bedroom unit, or HUD-approved exception area payment standard, is used.
- If the unit has two or more bedrooms in the unit the PHA's payment standard for a 1-bedroom unit, or HUD-approved area exception payment standard, is used.

Benefits

- **Give back** to those who served our country. No Veteran should ever have to experience homelessness.
- **Empower** Veterans to age with independence, allowing Veterans to remain in the community, safely supported and cared for. The program provides the housing, HUD-VASH provides the supportive services.
- **Peace of mind:** Properties receive long-term rental income, and the tenant receives long-term tenant supports.

Who Can Benefit

- Almost **half** of Veterans enrolled with the Veterans Health Administration (VHA) are aged 65 years or older.
- **More than 60%** of Veterans in the HUD-VASH program are **older than 60 years.**
- It is expected that between fiscal year 2020 and fiscal year 2035, the subgroup of Veterans aged 85 and older will increase by 66%, and specifically the subgroup of women Veterans aged 85 and older will increase by 159%.
- Americans with three or more health challenges will double for populations between 65 and 75 years of age; By the age of 75, most Americans have three or more chronic medical conditions.

Questions

Shared Housing

What Is Shared Housing?

Two or more people who live in one permanent rental housing unit, sharing costs or, basically ...

- Basically ... it's roommates!

ROOMMATES
WANTED

Who Can Participate in Shared Housing?

- Anyone who wants or is willing to have a roommate
- Who's that?
 - Eligible for your program
 - Wants to participate in shared housing
 - Includes those who want roommates not enrolled in the program
- There is no definitive list of who will “succeed” at shared housing

Remember! Permanent housing does NOT mean the tenant won't move on to bigger or better housing arrangements in the future.

Shared Housing Must Have

Client Choice



Shared Housing Should Have ...

- Roommate Agreements
 - Not everyone wants/needs a formal agreement
 - Verbal agreements are good too
 - Agreements should cover roommate expectations for all roommates
 - Case managers can facilitate a conversation around expectations and an agreement
 - Agreements may include trade offs as part of the roommate situation (shopping for a roommate who is high risk of COVID-10, one roommate responsible for certain chores or help etc

Matching Roommates

- Possibly the most important aspect of shared housing
- May happen organically, may need to match people who don't know each other
- Most successful when roommates choose each other
- Case managers should help guide clients to make the best choice for them, but case managers should NOT choose roommates for clients
- Using Housing Problem Solving techniques can help identify who is willing/wants a roommate and the type of roommate they may be looking for.

Matching Considerations

- Sleep schedules (morning people vs night owls)
- Work schedules (more time together? Apart?)
- Cleaning tendencies and expectations
- Chores Expectations (dishwashers vs bathroom cleaners)
- Settling disputes
- Preferred environment
- Sobriety/active use
- Family or Friend visits/culture
- Mutually beneficial skills (someone with former medical training living with someone who might require medical care)

Is there anyone they CANNOT live with? What are the deal breakers?

Matching Consideration

No really,

Is there anyone they **CANNOT** live with?
What are the deal breakers?

Matching Considerations

- Keeping a good situation going
 - Follow-up and get feedback
 - Check in on a regular basis
 - Talk to client, as well as landlord
 - If you have permission from the client, speak with the roommate(s)

Roommate Safety

- Most roommate situations are peaceful, but case managers and program staff should develop safety plans for roommates
- Safety plan should focus on removing Veteran, regardless of whether Veteran is perpetrator or victim
- Identify funding to move Veteran into emergency housing, provide additional supportive services

Where do we do Shared Housing?

- Start with the landlords you know
 - Do they have large units or single homes/properties to rent?
 - Are they willing to do separate leases for each roommate?
- Who received Homelessness Prevention funds in your community?
 - Use the funds as a landlord recruitment tool for RRH or multi-bed units

Benefits to Landlords

- Fill larger units faster
- Handle tenant issues separately
- Better guarantee of at least some rent compared to single household tenants
- Work with case manager to resolve conflicts early
- Supportive services as part of a household package
- Provider supports relocation or unit turnover when things go wrong

But, how do you keep landlords engaged?

- Landlords and Case Management
 - Know what your case managers can provide
 - Monthly check-ins?
 - Do not say you will check in and then not do it
 - Provide contact information for case manager/housing navigator
 - Decide if program will provide a new resident if a roommate leaves

Working with Landlords

- Set expectations with landlords:
 - When a roommate leaves:
 - Who is responsible for replacing the roommate?
 - Does your program allow vacancy payments?
 - Were there issues with the remaining roommate(s) that the case manager needs to follow-up on?

Soooo How do We Get Started?

- Shared Housing can sometimes feel like two steps forward, one step back
- It's important to be thoughtful about how and where you begin.
- Piloting Shared Housing can lead to smoother processes and less frustration



Quick Reminders

- Shared Housing is one of many housing solutions available to us
 - Just because you start doing shared housing doesn't mean you should stop housing people in single units—some people really like/need that type of housing!
- Anyone can do shared housing, regardless of length of time experiencing homelessness and past rental history.
- Shared housing is permanent, but people may use it for a short period of time before they move on to their own unit or a more stable housing situation.
- Ask people tough questions about who they can and cannot live with.

Building the Airplane While Flying

- Creating a Shared Housing pilot is an opportunity to make changes and work out process kinks while still housing Veterans
- Builds in time for reflection and opportunity to learn from successes and mistakes

What do you need for a Good Pilot?

- A good process for roommate matching
- A great landlord partner
- Built in time for reflection and correction



Process for Roommate Matching

- Check the SSVF Toolkit for possible resources
- Try working through a few matches and see if your matching process or tool is working
- Get feedback from Veterans a month or so after living together to see if there was something you missed that would have improved the matching process.

A Great Landlord Partner

- Pick one or two landlords where you have a strong partnership
- Do shared housing in a handful of units
- Set up process with landlord for moving people in and out of units

Building in Time for Reflection and Correction

- All programs and pilots should have process for reflection and correction
- Reflect with all staff involved and Veterans:
 - What about the process worked?
 - What about the process could work better?
 - What about the process needs to go back to the drawing board?

REMEMBER!!!

- Pilots are never perfect
 - Even when well-planned!
- If the first match doesn't work, try another
- Work with your local CoC, VAMC to find good matches

Questions?

Western NY HUD-VASH/Assisted Living Collaboration

Kristen Weese, LCSW
Program Manager

Alicia Sholtz, LCSW
HUD-VASH Coordinator

Health Care for Homeless Veterans Program
VA Western New York Healthcare System

Where did we begin?

- Staff attended HUD-VASH/GEC Collaboration Community Calls.
- Meeting was held with Deborah Lee and other trailblazers! This meeting included our (Public Housing Authority) PHA!
- Staff reviewed options and current needs of the Program.
- Assisted Living Facilities (ALFs) were identified as the biggest need for our population.

- ***What did we do next?***

- Staff reached out to the Tampa VAMC for consultation.
- Staff, and local PHA reached out to the Tampa PHA, Citrus county Housing Services, for clarification on process.
 - *Communication between the two PHAs was extremely helpful!!*
- Staff contacted local ALFs to explain this new housing option for homeless Veterans.

BINGO! We have a winner!

- One local ALF interested in this collaboration.
- Meetings with key ALF staff were conducted to explain the program.
- Referral process and roles were discussed.

Western NY HUD-VASH/Assisted Living Collaboration

- First referral was made in December 2021. Seventeen Veterans have been referred to date.
- Veterans are identified as needing a high level of care (discussion with Veteran, case manager and medical provider).
- Veterans are offered a tour of the facility.
- PHA is notified that Veteran needs a higher level of care and voucher is re-issued.
- ALF application is completed by HUD-VASH Staff and medical documentation is completed
- RFTA (request for tenancy approval) is completed with help and education of HUD-VASH Staff.
- PHA bases the rent on a 0-bedroom payment standard.
- ALF is inspected by PHA, lease is signed, and Veteran is ready to move in!



The PHA paperwork and ALF paperwork is completed at the same time

Western NY HUD-VASH/Assisted Living Collaboration

Success!!!!

WNY HUD VASH Program was featured nationally for their collaborative work with an ALF.

[Buffalo HUD-VASH partners with assisted living facility to help older Veteran - VA News](#)



Western NY HUD-VASH/Assisted Living Collaboration

- Veterans need to have some form of income to qualify.
- We looked for facilities who accept Medicaid (additional payer source).
- One HUD-VASH Case Manager is the POC for this collaboration.
- This is a PROCESS that will take some time. It is not an immediate solution.
- Works best with Veterans who are already in the HUD-VASH Program.
- Be mindful when educating the larger medical center about this collaboration!



Orlando VA Healthcare System Medical Foster Home Collaboration

Steven Tillman, LCSW

VISN 8 Network Homeless Coordinator
VA Sunshine Network

Jina Thalmann, LCSW

Orlando Homeless Program Manager

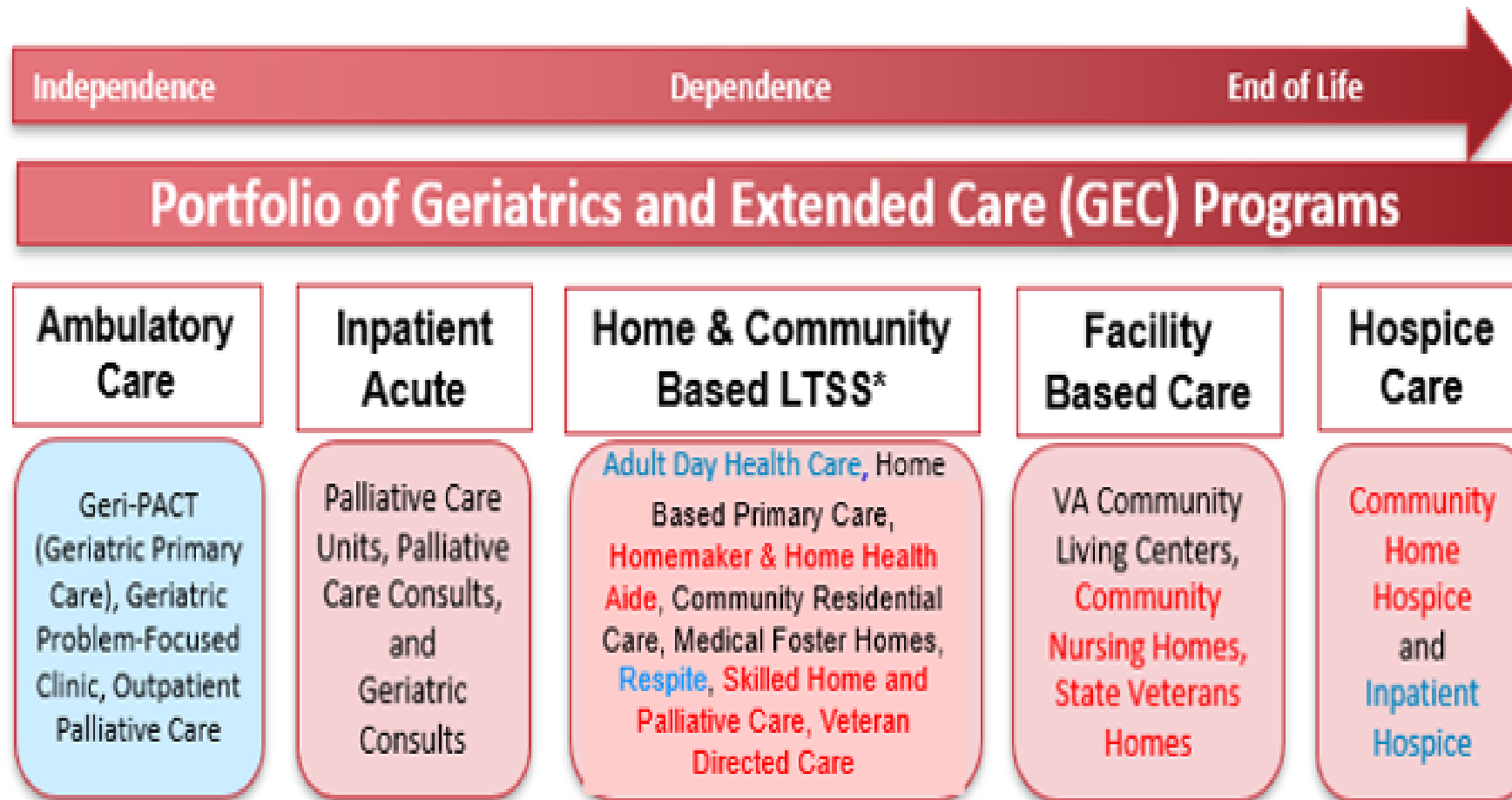
Overview

- Monthly call between GEC/MFH/VASH began in December 2021; later added Contract Nursing Home Social Work staff and CRC Coordinator
- Initially each program provided overview of flow/processes
- Education of HCHV staff to begin to identify potential Veterans already in Homeless Programs
- Outreach to Public Housing Authorities-innovation, flexibility, creativity
- 3 successful placements-each on a different path to this placement
- Relationship with Home Based Primary Care is critical-MFH Coordinator is key linkage

HUD-VASH Efforts to Support the Aging Population

- According to research conducted by the VA National Center on Homelessness, there is growing evidence of an aging trend among homeless Veterans who are at considerable risk of entering the homeless system of care
- HUD-VASH has prioritized an Aging Veterans Initiative which will embrace recommendations from these findings to include “better integrating VA and community health care, social services, and housing programs to enable Veterans to age in place for as long as possible and avoid nursing home placement; creating more flexible housing criteria; and educating homeless care providers about resources”

GEC – Continuum of Care for Veterans of ALL Ages



VA Aging Challenges Ahead

Aging Veteran Population	By 2028, the number of Veterans > 75 years who are also > 70% service connected <u>will more than triple</u>
	By 2037, Veterans > 75 years will <u>increase by 71% (~435K+)</u>
	> 90% of Americans would prefer to stay in their own homes as they age
Changing Veteran Needs	Between the ages of 65 and 75, the % of Americans with 3 or more limitations in Activities of Daily Living <u>double</u>
	By age 75, <u>57% of Americans</u> have > 3 chronic medical conditions
	Older combat veterans can experience a resurgence of PTSD symptoms in older age for several reasons, including retirement, increased health problems, decreased sensory abilities, reduced income, loss of loved ones, decreased social support, cognitive impairment, and other stressors and causes of functional decline
	Studies have found an association between PTSD and depressive disorders and an increased risk of dementia in military veterans.
Geriatric & Palliative Care Workforce Shortage	By 2025, Geriatrician projected national <u>shortage of nearly 27K clinicians</u>
	Expected shortages of Geriatric trained Nurse Practitioners and other clinicians
	By 2040, Hospice and Palliative Care Physicians projected national shortage of <u>up to 15K clinicians</u>
	Many areas already have very limited or no access to Geriatric or Palliative Care expertise either in the VA or in their local community so it can't be purchased
Rising Health Care Costs	The VHA average cost for each community contract nursing home bed was <u>~\$98,000/year</u> in FY19
	In FY19, The GEC Long Term Services & Supports accounted for ~ <u>12% of the total VHA budget</u> and nursing home care is the largest contributor
	In FY19, Veterans > 65 accounted for <u>59% of all VHA expenditures</u>

GEC Collaboration: Special Housing Types

HUD-VASH and GEC programs are exploring options for model development based on existing use HUD Public Housing Authority (PHA) special housing types and existing GEC residential care programs where Veterans can utilize their voucher to cover the cost of housing in the following programs:

- **Medical Foster Home**
- **Home Assisted Living**
- **Community Residential Care**
- **Adult Care Homes**

PHA Special Housing Types

HUD Special Housing Types. A group of specialized housing programs that are designated for individuals with special needs (generally elderly or disabled).

Special Housing Types include the following:

- Single room occupancy (SRO) housing;
- Congregate housing;
- Group home;
- Shared housing

Special Housing in Medical Foster Home Model

Recommendation

Use of tenant-based HUD-VASH vouchers in a medical foster home model as shared housing

Considerations

- HUD-VASH participant must choose the shared housing option
- The assisted household may share a unit with a HCV voucher holder or unassisted household
- If approved by the PHA, a live-in aide may reside with the family to care for a person with disabilities
- Housing Quality Standards apply with some exceptions.
- Payment Standard – Lower of the payment standard for the family units size or the pro-rata share of the payment standard for the shared housing unit size

Who might be referred for MFH/VASH?

- Formerly homeless Veteran who has been stably housed and supported in a VA homeless program but as he/she ages; they need more support
- Homeless Veteran who isn't appropriate for emergency, transitional, or permanent housing programs based on his/her medical or mental health needs for additional support

What type of support will be provided?

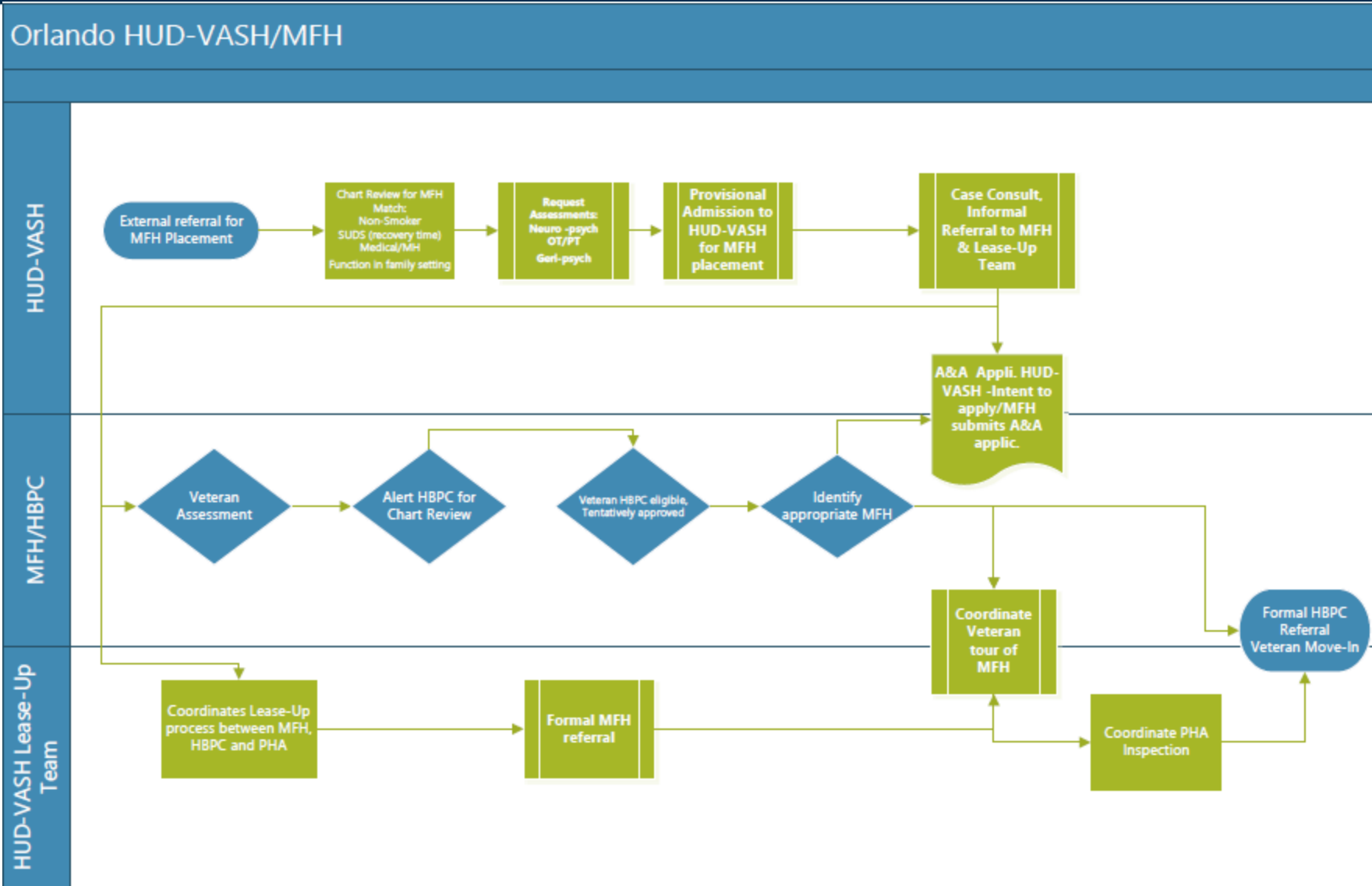
Financial-HUD/VASH

- HUD Housing Assistance Payment (HAP) comes from the public housing authority
- Veteran rent share (Veteran portion of rent) comes directly from the Veteran

Supportive Services

- In home case management services provided by a Social Worker
- Access to VA medical and specialty care, virtual care, clinical contact center, etc.
- When clinically appropriate; peer support services

Orlando HUD-VASH/MFH Swim Chart



Overview of MFH

- Aid & Attendance eligibility critical to financial formula-*the 'magic formula'*
 - MFH cost \$3200 (1/3 housing and 2/3 direct and auxiliary care costs)
 - PHA used Congregant Living Special Housing Type payment standard
 - PHA paying \$650/HAP; Tenant Rent to Owner \$350=\$1000/month
 - Veteran income (Social Security) and A & A-\$2200

Lessons Learned

- ❖ Case conference, Case conference, Case conference-Reviewed 30+ Veteran cases/charts to find the right fit
- ❖ Tap into the knowledge of VASH staff to determine 'fit' for this type of housing model
- ❖ Need for flexible Medical Foster Home caregiver who understands the unique characteristics of those who were or are homeless
- ❖ VASH Case Manager is the housing expert and is key to ensure placement remains stable and 'working' for both parties (MFH Caregiver and Veteran); identify any potential challenges early

Successful Implementation

A “Good Win” for Navy Veteran!

[VA Homeless programs a “Good Win” for Navy Veteran - VA News](#)



Questions